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PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY **PATENT APPLICATION TRANSMITTAL**

| Attorr | ney Docket No. | |
|---------|----------------|------------------|
| First I | nventor | Duron et al. |
| Title | Device & | Method Structura |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| APPLICATION ELEMENTS | | | ADDR | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application | | | | | |
|--|--|---|-----------------|--|--|------------------|--|--|--|
| See MPEP chapter 600 con | | Was | shington, DC 2 | 0231 | | | | | |
| 1. | | | | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper | | | | | |
| - Background of the Invention | | | | c Statements verifying identity of above copies | | | | | |
| - Brief Summary - Brief Description | of the Invention on of the Drawings (<i>if filed</i> | v. | AC | ACCOMPANYING APPLICATION PARTS | | | | | |
| - Detailed Description | | | | 9. Assignment Papers (cover sheet & document(s)) | | | | | |
| | Claim(s)Abstract of the Disclosure | | | | 10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney | | | | |
| 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 17] | | | 11. | English Translation | Document (if | ., , | | | |
| 5. Oath or Declaration | n [Total Pages 17] 12. X Information Disclosure X Copies of IDS Statement (IDS)/PTO-1449 | | | | | | | | |
| a. Newly executed (original or copy) | | | 13 | | | | | | |
| b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) | | | | 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | | |
| i. <u>DELET</u> | 15. | 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) | | | | | | | |
| Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | | 16. | Monnybligation Reguest under 25 U.S.C. 122 | | | | | |
| 6. Application Data Sheet. See 37 CFR 1.76 | | | 17 | · _ · | | | | | |
| 18. If a CONTINUING APPLI or in an Application Data She | | ate box, and supp | y the requisite | e information below a | and in a prelim | inary amendment, | | | |
| Continuation | | tinuation-in-part (CIP) | of pri | ior application No.: | , | | | | |
| Prior application information: | Examiner | , | • | oup Art Unit: | ······································ | | | | |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. | | | | | | | | | |
| The incorporation can only be | | | | | olication parts. | | | | |
| | 19. | CORRESPONDE | NCE ADDRE | <u>88</u> | | | | | |
| Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or X Correspondence address below | | | | | | ddress below | | | |
| Name | Abanti B. Singla | | | | | | | | |
| | PMB 336, 905 W. 7th Street | | | | | | | | |
| Address | | | | | | | | | |
| City | Frederick | | State | MD | Zip Code | 21701 | | | |
| Country | United State | es Telej | | 01)6204070 | Fax | 620-1727 | | | |
| Name (Print/Type) | | Singla | T | ation No. (Attorney | | , 681 | | | |
| Signature | Mat B. | <u>[].</u> | | | | 21-2002 | | | |

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Certificate Of Mailing

I hereby certify that this application is being submitted with the United States Postal Service, Express Mail Service, Label No. <u>ET494469079US</u> on February 21, 2002.

2-21-02

Date

Abanti B. Singla

In re: Duron et al

Examiner:

DEVICE AND METHOD FOR DETERMINING AND DETECTING THE ONSET OF STRUCTURAL COLLAPSE

Group Art Unit:

Filing Date: February 21, 2002

Honorable Commissioner, United States Patent & Trademark Office Washington DC 20231

Dear Sir:

Enclosed please find a copy of the following:

- (1) Specification (74 pages);
- (2) Drawing sheets (17 sheets);
- (3) Filing fees in the amount of \$1108.00;
- (4) Return Postcard;
- (5) Utility Application Transmittal sheet;
- (6) Fee calculation sheet; and
- (7) Declaration.

Please send correspondences to: Abanti B. Singla, Bartunek & Bhattacharyya; PMB 336; 905 W. 7th Street; Frederick, Maryland, 21701.

Please contact Abanti B. Singla at (301) 620-4070 regarding any matters concerning this application.

Sincerely

Abanti B. Singla

Registration No. 36,681

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR **SMALL ENTITY** (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA **RATE** FEE RATE FEE BASIC FEE \$ 3.7.0 OR \$_ (37 CFR 1.16(a)) **TOTAL CLAIMS** minus 20 =74 54 OR (37 CFR 1.16(c)) x \$_**9**_= 486 x \$ INDEPENDENT CLAIMS <u>42</u>= 252 minus 3 =OR = (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = = 1108 **TOTAL** OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II OTHER THAN **SMALL ENTITY** OR **SMALL ENTITY** (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER **RATE** TIONAL **RATE** TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total ** Minus = (37 CFR 1.16(c)) OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT, FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL TIONAL **RATE AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total ** Minus = \$ OR *** Independent = Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column I) (Column 3) (Column 2) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL **RATE** TIONAL **AMENDMENT** AFTFR **EXTRA PREVIOUSLY** FEE FEE AMENDMENT PAID FOR OR Total Minus = x \$ (37 CFR 1.16(c)) OR Independent *** Minus = (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL OR TOTAL * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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